

DOCKET NO.: HENK-0129/H-5328

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of:

Thomas Renger, et al.

Application No.: 10/771,648

Filing Date: February 4, 2004

For: Reclosable Pack

Confirmation No.: 3772

Group Art Unit: 1761

Examiner: Sarah Louise Kuhns

Filed via EFS-Web on June 12, 2006

Mail Stop Petitions  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

PETITION UNDER 37 CFR 1.182 TO WITHDRAW PETITION FOR REVIVAL  
PURSUANT TO 37 CFR § 1.137(b) FILED MARCH 10, 2006

1. Applicants filed a Petition to Revive pursuant to 37 CFR 1.137(b) on March 10, 2006, along with a Request for Continued Examination (RCE). Applicants now wish to *withdraw* said Petition and to allow the captioned patent application to remain abandoned.
2. Applicants respectfully request a refund of the \$1,500 Petition fee and \$790 RCE fee submitted to the U.S. Patent Office on March 10, 2006. Please credit said refund to the Deposit Account of the undersigned, Deposit Account No. 23-3050.

FEES

- ☒ Please charge the fee in the amount of \$400.00 (37 CFR 1.17(f)), in connection with this Petition Under 37 CFR 1.182, to Deposit Account No. 23-3050.
- ☒ The Commissioner is hereby authorized to charge any deficiency or credit any overpayment of the fees associated with this communication to Deposit Account No. 23-3050.

Adjustment date: 09/28/2006 CKHLOK  
03/14/2006 MGBREM1 00000041 10771648  
01 FC:1801 -790.00 OP

Respectfully submitted,

Date: June 12, 2006

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Repln. Ref: 09/28/2006 CKHLOK 0010171500  
DAH: 233050 Name/Number: 10771648  
FC: 9204 \$790.00 CR

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**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

| REQUEST FOR PATENT FEE REFUND                         |                                   |                                                                                                                                                                                                                                                                                                                                                         |              |           |   |   |   |    |   |   |   |   |
|-------------------------------------------------------|-----------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------|---|---|---|----|---|---|---|---|
| 1 Date of Request: 09/28/06                           |                                   | 2 Serial/Patent # 10771648                                                                                                                                                                                                                                                                                                                              |              |           |   |   |   |    |   |   |   |   |
| 3 Please refund the following fee(s):                 |                                   | 4 PAPER NUMBER                                                                                                                                                                                                                                                                                                                                          | 5 DATE FILED | 6 AMOUNT  |   |   |   |    |   |   |   |   |
|                                                       | Filing                            |                                                                                                                                                                                                                                                                                                                                                         |              | \$        |   |   |   |    |   |   |   |   |
|                                                       | Amendment                         |                                                                                                                                                                                                                                                                                                                                                         |              | \$        |   |   |   |    |   |   |   |   |
|                                                       | Extension of Time                 |                                                                                                                                                                                                                                                                                                                                                         |              | \$        |   |   |   |    |   |   |   |   |
|                                                       | Notice of Appeal/Appeal           |                                                                                                                                                                                                                                                                                                                                                         |              | \$        |   |   |   |    |   |   |   |   |
|                                                       | Petition                          |                                                                                                                                                                                                                                                                                                                                                         |              | \$        |   |   |   |    |   |   |   |   |
|                                                       | Issue                             |                                                                                                                                                                                                                                                                                                                                                         |              | \$        |   |   |   |    |   |   |   |   |
|                                                       | Cert of Correction/Terminal Disc. |                                                                                                                                                                                                                                                                                                                                                         |              | \$        |   |   |   |    |   |   |   |   |
|                                                       | Maintenance                       |                                                                                                                                                                                                                                                                                                                                                         |              | \$        |   |   |   |    |   |   |   |   |
|                                                       | Assignment                        |                                                                                                                                                                                                                                                                                                                                                         |              | \$        |   |   |   |    |   |   |   |   |
| X                                                     | Other RCE (1801)                  |                                                                                                                                                                                                                                                                                                                                                         |              | \$ 790.00 |   |   |   |    |   |   |   |   |
|                                                       |                                   | 7 TOTAL AMOUNT OF REFUND                                                                                                                                                                                                                                                                                                                                |              | \$ 790.00 |   |   |   |    |   |   |   |   |
| 10 REASON:                                            |                                   | 8 TO BE REFUNDED BY:                                                                                                                                                                                                                                                                                                                                    |              |           |   |   |   |    |   |   |   |   |
| X                                                     | Overpayment                       | Treasury Check                                                                                                                                                                                                                                                                                                                                          |              |           |   |   |   |    |   |   |   |   |
|                                                       | Duplicate Payment                 | Credit Deposit A/C #:                                                                                                                                                                                                                                                                                                                                   |              |           |   |   |   |    |   |   |   |   |
| No Fee Due (Explanation):                             |                                   | 9 <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 20px;">2</td> <td style="width: 20px;">3</td> <td style="width: 20px;">--</td> <td style="width: 20px;">3</td> <td style="width: 20px;">0</td> <td style="width: 20px;">5</td> <td style="width: 20px;">0</td> </tr> </table> |              |           |   | 2 | 3 | -- | 3 | 0 | 5 | 0 |
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|                                                       |                                   |                                                                                                                                                                                                                                                                                                                                                         |              |           |   |   |   |    |   |   |   |   |
|                                                       |                                   |                                                                                                                                                                                                                                                                                                                                                         |              |           |   |   |   |    |   |   |   |   |
|                                                       |                                   |                                                                                                                                                                                                                                                                                                                                                         |              |           |   |   |   |    |   |   |   |   |
| 11 REFUND REQUESTED BY: Christina T. Donnell          |                                   |                                                                                                                                                                                                                                                                                                                                                         |              |           |   |   |   |    |   |   |   |   |
| TYPED/PRINTED NAME: Christina T. Donnell              |                                   | TITLE: Petitions Attorney                                                                                                                                                                                                                                                                                                                               |              |           |   |   |   |    |   |   |   |   |
| SIGNATURE: <i>C. T. Donnell</i>                       |                                   | PHONE: 272-3211                                                                                                                                                                                                                                                                                                                                         |              |           |   |   |   |    |   |   |   |   |
| OFFICE: 4700                                          |                                   |                                                                                                                                                                                                                                                                                                                                                         |              |           |   |   |   |    |   |   |   |   |
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| APPROVED: <i>CKH/K</i>                                |                                   | DATE: 9/28/06                                                                                                                                                                                                                                                                                                                                           |              |           |   |   |   |    |   |   |   |   |

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